

# TRANSMITTAL FORM

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|---------------------------|------------------------------------|
| Application Serial Number | 10/662,824                         |
| Filing Date               | September 16, 2003                 |
| First Named Inventor      | Christian FRISCH                   |
| Group Art Unit            | 1637                               |
| Examiner Name             | Suchira Pande                      |
| Attorney Docket No.       | 49974-023US (formerly 49981-018US) |
| Confirmation No.          | 2286                               |

## ENCLOSURES (check all that apply)

|  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> <b>Fee Transmittal Form</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Check Attached</li> <li><input type="checkbox"/> Copy of Fee Transmittal Form</li> </ul>   | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)<br><input type="checkbox"/> Formal Drawing(s)<br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><input checked="" type="checkbox"/> <b>Power of Attorney w/ 3.73 Stmt. (Revocation of Prior Powers)</b><br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><input type="checkbox"/> Small Entity Statement<br><input type="checkbox"/> CD(s) for large table or computer program<br><input type="checkbox"/> Amendment After Allowance | <input type="checkbox"/> Request for Certificate of Correction<br><ul style="list-style-type: none"> <li><input type="checkbox"/> Certificate of Correction (in duplicate)</li> </ul> <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><input type="checkbox"/> Appeal Brief (in triplicate)<br><input type="checkbox"/> Status Inquiry<br><input type="checkbox"/> Return Receipt Postcard<br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><input type="checkbox"/> Additional Enclosure(s) (please identify below) |
| <input checked="" type="checkbox"/> <b>Amendment/Response</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Preliminary</li> <li><input checked="" type="checkbox"/> <b>Non Final</b></li> <li><input type="checkbox"/> Affidavits/declaration(s)</li> <li><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____]</li> </ul> |   |  |
| <input checked="" type="checkbox"/> <b>Petition for Extension of Time (1 month)</b>  |   |  |
| <input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <li><input type="checkbox"/> Form PTO-1449</li> <li><input type="checkbox"/> Copies of IDS Citations</li> </ul>   |   |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)  |   |  |
| <input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <li><input type="checkbox"/> Paper Copy/CD</li> <li><input type="checkbox"/> Computer Readable Copy</li> <li><input type="checkbox"/> Statement verifying identity of above</li> </ul>   |   |  |

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Respectfully submitted,  
  
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